

**DECLARATION AND POWER OF ATTORNEY  
FOR PATENT APPLICATION**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INDELIBLE WATERMARK ON OPTICAL DISCS

the specification of which

☒ [X] is attached hereto

☐ [ ] was filed on \_\_\_\_\_ as  
Application Serial No. \_\_\_\_\_  
and was amended on \_\_\_\_\_.  
(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I do not know and do not believe that the invention was ever patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application.

I do not know and do not believe that the invention was in public use or on sale in the United States of America more than one year prior to this application.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known by me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or

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Case	Age		Sex	Duration		Site	Histology		Immunohistochemistry	Molecular biology	Outcome
	At onset	At diagnosis		At onset	At diagnosis		At onset	At diagnosis			
1	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
2	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
3	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
4	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
5	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
6	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
7	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
8	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
9	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
10	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
11	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
12	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
13	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
14	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
15	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
16	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
17	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
18	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
19	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
20	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
21	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
22	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
23	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
24	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
25	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
26	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
27	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
28	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
29	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
30	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
31	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
32	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
33	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
34	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
35	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
36	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
37	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
38	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
39	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived
40	10	10	F	10	10	Brain	Low-grade	Low-grade	+	+	Survived
41	10	10	M	10	10	Brain	Low-grade	Low-grade	+	+	Survived

Priority  
Claimed

☐ Yes      ☐ No

☐ Yes      ☐ No

(Application Serial No.)	(Filing Date)
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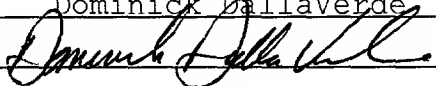
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
1	1/1/1980	patented
2	2/1/1980	pending
3	3/1/1980	abandoned

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first inventor Dominick DallaVerde  
First Inventor's signature  11/15/01  
Date

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